strict of Columbia		300Q SUB Sale Quarterly Ret							
File this return for the 4 qu	arters of	f 2013 (Oct 2012 - Sep	t 2013).		1	3 8 0 0	3 0 0	3 1 0 0 0 1	
Taxpayer Identification Number		fark if: X FEIN fark if: X SSN	Account 123		23123	Due Date	VE	FTWARE DEVELOPER USE ONLY NDOR ID# 1234	
Business Name					<u></u>			Mark if: X amended return Mark if: X final return (See inst	n otio
				iHIJI		Tax Period Endir	ng (MMYY)		rucuc
12345ABCDEFG Vailing Address Line #2			City				si	ate Zipcode + 4	
12345ABCDEFG	HIJKI	_ABCDEFGH	ABCE)EFG	HIJKLA	BCDEFG	H A	B 123456789	
Si	ales tax l	licensees must file a	return ever	i if no sa	ales were n	nade or no tax	or fees a	are due.	
COLUMNA - DESCRIPTION		COLUMN B - TAXABI	E AMOUNT		TAX RATE	COLUMN	C - TAX D	UE - multiply col B by tax rate, ent	er he
. Use Tax on Purchases Taxable at 6%	1B	\$123456789	9.99		X .06	10		\$123456789.99	
2. Gross Sales	2B	\$123456789	9.99						
Sales Taxable at 6%	3B	\$123456789			X .06	3C		\$123456789.99	
 Sales and Purchases of Off-Premises Alcohol 	4B	\$123456789	9.99		X .10	40		\$123456789.99	
Taxable at 10% 5. Other Sales and Purchases Taxable at 10%	5B	\$123456789	99		X .10	50		\$123456789.99	
S. Sales for Parking		·			X .18	60		\$123456789.99	
Taxable at 18% 7.Sales and Purchases of Othe	6B er	\$12345678							
Tobacco Taxable at 12%	7B	\$12345678	9.99		X .12	70		\$123456789.99	
8. Sales and Purchases Taxable at 14.5%	8B	\$123456789	9.99		X .145	8C		\$123456789.99	
9. Reserved	9B	\$123456789	9.99		х	90		\$123456789.99	
					Enter 2% of 9 less 3% disc	911 sales receipts ount	10C	\$123456789.99	
					Disposable C	arryout Bag Fee	11C	\$123456789.99	
				12. F	Reserved		12C	\$123456789.99	
				13 6	Penalty - 5%	per month	13C	\$123456789.99	
					vith a maximi				
				14. I	nterest - 10%	per year	14C	\$123456789.99	
					otal Amoun Add lines 1C -		15C	\$123456789.99	
Will the funds for this	ayment	come from an account	outside the L	IS?	Yes 🔿 N	o 🔷 See instru	ctions.		
Under penalties of	law, I decla	re that this return is correct, t	o the best of my	knowledge	Declaration o	f paid preparer is bas	ed on the i	nformation available to the preparer.	
LEASE SIGN HERE Taxpayer's Signat	ure		Title			MMDDYY Date	ΥY	Telephone Number of Person to Cor 1234567890	ntact
AID PRE-						MMDDY		Paid Preparer's PTIN 123456789	
RER ONLY Preparer's Signatu	re (If other t	han taxpayer)				Date	IIII		
Firm Name									
Firm Address									
				BR-8000					